



WARE ACADEMY
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GLOUCESTER, VA 23061
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CATALOG NUMBER:

WARE ACADEMY AUCTION DONATION FORM

Contact Person: _____

Company Name (if applicable): _____

Street Address: _____

City, State, Zip: _____

Phone: _____

Donor's Name (as it should appear in the catalog): _____

PRODUCT, ITEM OR SERVICE

(Please describe your donation in detail, including any restrictions or expiration dates)

Item Name: _____ Suggested Value: _____

Item Description: _____

Please attach any brochures, fliers or pictures to be displayed at the auction.

I agree to mail, deliver or make arrangements for pick up of the above items. All contributions are tax deductible. Services must be used within one year of the auction date unless otherwise specified.

Date: _____ Signature: _____